

TRAINING INSTITUTE FOR RESPONSIBLE VENDORS, INC. (404) 531 - 9237

## R.A.S.S. WORKSHOP

# RESPONSIBLE ALCOHOL SALES AND SERVICE WORKSHOP Presented by the Training Institute for Responsible Vendors, Inc.

Our company has over ten years of training experience in the Alcohol Hospitality Industry. We satisfy alcohol training requirements all across the Southeast including: Alabama, Florida, Georgia, North Carolina, and South Carolina.

THIS RASS WORKSHOP IS FOR THE LICENSEE AND MANAGEMENT, AND IT HAS BEEN APPROVED TO SATISFY THE REQUIRMENTS OF: Cobb County, Sec. 6-96; City of Kennesaw, Sec. 6-69; City of Powder Springs, Sec. 3-103, Sec. 3-182; City of Roswell, Sec. 3-2-10; City of Smyrna, Sec. 6-129.

Fees for Workshop are \$100.00 per Participant due at Check In at Workshop. Check or Cash. Make Checks Payable to T.I.R.V. Inc. NO ONE WILL BE ADMITTED AFTER WORKSHOP HAS BEGUN. \*Attendees who have difficulty with English can bring an interpreter at no additional charge.

#### 2010 R.A.S.S. WORKSHOP DATES

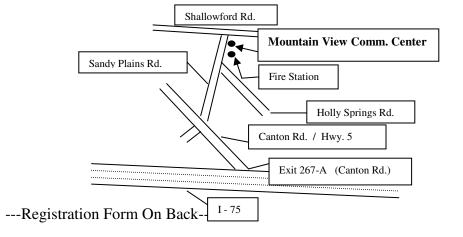
Thursday, Jan. 21 Wednesday, Apr. 21 Thursday, July 15 Thursday, Oct. 14 Thursday, Feb. 18 Wednesday, May 19 Wednesday, Aug. 18 Thursday, Nov. 18 Wednesday, June 16 Wednesday, Sept. 22 Thursday, Dec. 9

All Classes are from 9AM TO 12PM.

WE ALSO OFFER PRIVATE WORKSHOPS FOR YOUR CONVENIENCE, CALL FOR DETAILS.

#### DIRECTIONS TO MOUNTAIN VIEW COMMUNITY CENTER

I-75 to Exit 267-A Hwy. 5 (Canton Rd.) Turn Right at first light (Sandy Plains Rd.) After about 5 miles you will pass library and then the Fire Station. The next two drives takes you to parking for the center. 3400 Sandy Plains Rd. Marietta, GA 30066 IF LOST CALL: 404-452-9237





### R.A.S.S. WORKSHOP REGISTRATION FORM

| Name of Licensee / Attendee:                          |                                  |
|---|----------------------------------|
| Name of Licensed Establishment                        |                                  |
| And Address   |                                  |
| Phone:  |                                  |
| WORK SHOP DATE I WILL ATTEND IS                       |                                  |
| E M 'ID ' 4 4' 4 E #550 500 0141 /                    |                                  |
| Fax or Mail Registration to: Fax # 770 – 509 – 0141 / | T.I.R.V. Inc.<br>P.O. Box 421128 |
| Ouestions / Information · 404 _ 531 _ 9237            | Atlanta GA 30342                 |